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Everyday experiences of migrant families with No Recourse to Public Funds

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Victoria Odumade is a graduate of the MA Social Work programme at Northumbria University. She is presently working as a Social Worker within the Adult Learning Disability team in a North East Local Authority. As a migrant herself with three British born children, she wanted to create awareness of the everyday struggles of migrant families, especially those from ethnic minority backgrounds. She also wanted to highlight the issue of British born migrant children missing out on resources and support due to No Recourse to Public Funds.

Dr Pamela L Graham is a Vice Chancellor's Senior Research Fellow at Northumbria University and a Chartered Psychologist. Her research interests include poverty and food insecurity amongst children, adolescents and parents. When Victoria approached Pam with an idea to investigate the topic of No Recourse to Public Fund, Pam had very little knowledge of this Visa stipulation and learnt a lot from supervising this project.

Bringing together Pam's research experience and Victoria's knowledge of No Recourse to Public Fund proved to be very beneficial to both individuals as they were able to learn from one another, demonstrating a key advantage of multidisciplinary work.

Abstract

Increasing poverty rates in the UK have been at the forefront of much debate in recent years, particularly as poverty can have long term, negative consequences for those embroiled within it. In order to support people on low income, the UK have a welfare system that provides money to cover basic living expenses, free healthcare and housing support. However, there are families residing in the UK with no access to such support due to the little-known visa stipulation, no recourse to public funds (NRPF), which prevents families who have moved to

the UK from outside of the European Union from accessing welfare support. To date, research into the impacts of NRPF is limited. The aim of the current study was therefore to qualitatively investigate the everyday experiences of migrants living in the UK with NRPF. Interviews with 6 black African participants revealed that NRPF is not well understood. It leaves people fearful of accessing support despite facing extreme financial hardship, and they are forced to make challenging lifestyle choices to survive within a strict, changeable system. Findings are discussed in relation to literature on health and wellbeing. Future directions for research are also outlined.

Introduction

Recent statistics have shown that 22% of the UK population live in relative income poverty (Barnard et al., 2018). This means that their income falls below 60% of the median household income for the UK leaving them unable to maintain a standard of living equivalent to the norms for their society (McGuinness, 2018; Niemietz, 2010).

Factors such as inadequate access to education and health provision can drive low income, poverty and poor health (Rohwerder, 2014; Benzeval et al., 2014), which then become cyclic. In terms of physical health, Wagstaff (2002) proposed that poor dietary habits and inaccessible health provision experienced by those in poverty can lead to poor health, which subsequently results in a loss of income, greater vulnerability to more serious illness and maintenance of poverty. A similar relationship between poverty and poor mental health has also been identified, with poverty linked to a higher prevalence of mental illness, which consequently perpetuates the cycle of poverty (Lund, 2012). Additionally, when people face financial difficulties and expenditure exceeds income, this can lead to physical illness, stress and depression (Sweet, Nandi, Adam & McDade, 2013).

Furthermore, research has shown that children are not protected from the detrimental impacts of poverty (Ridge, 2009). In a review of qualitative research into its effects, Ridge (2011) reported that poverty in childhood had a negative impact on all aspects of children's lives, including physical, social and emotional outcomes. They miss out on resources and activities that their peers are able to access leading to experiences of social exclusion, stigma and shame; experiences which have been linked to internalising problems such as anxiety and depression (Bierman, 2004).

Given the detrimental impacts of poverty, England has a welfare system in place that was set up with the aim of supporting people financially to ensure that they are able to maintain an

adequate standard of living (Harris, 2004). For example, under the Universal Credit scheme, claimants are paid an allowance each month to cover their living expenses. The amount received is based on a person's circumstances, such as age, number of dependents and disability status (Government Digital Service, n.d.). Although the scheme has been heavily criticised for pushing people further into poverty, the Government have argued that the system will provide people with a route out of poverty by supporting them to gain and retain employment (Dwyer & Wright, 2014; Anderson & Masters, 2019). However, this is not the case for many families who have migrated to the UK from abroad. A little-known Visa stipulation termed No Recourse to Public Funds (NRPF) restricts many adults in England from accessing welfare support.

Under paragraph 6 the Immigration Rules (Home Office, 2019), the term 'public funds' is used to describe specific welfare benefits, such as Universal Credit and Local Authority housing, to which certain people are not entitled. NRPF typically applies to most adults who migrate to the UK from outside of the European Economic Area (EEA) to work or study, or to join family members (Clayton, 2012). NRPF does not apply to publicly funded services such as education and health, but the recent introduction of the Immigration Health Surcharge (IHS) means non-EEA migrants are required to pay an annual fee to access the National Health Service (NHS). This charge currently amounts to £300 per year for a student visa and £400 per year for all other visas, including those for children. A person making a visa application must pay IHS upfront for the total number of years included on their visa application, so someone applying for a 5-year visa would be required to pay £4000 for IHS in addition to their visa application fees (gov.uk).

With high outgoings and restricted income, it has been argued that NRPF puts people at considerable risk of destitution (Scottish Parliament, 2017). However, migration statistics are often published by the media with derogatory claims about groups of migrants moving to the UK for a more favourable lifestyle characterised by access to state benefits, housing and free healthcare (Berry, Garcia-Blanco & Moore, 2015). Research has also shown that immigration is not viewed favourably by the British public and the majority would like to see levels reduced (Blinder & Richards, 2018); though there appears to be a general lack of public understanding that surrounds immigration policy with no consideration given to the different reasons that people migrate to the UK (Blinder, 2013).

Alongside a lack of public understanding, little research has been conducted to investigate the experiences of UK migrants with NRPF. A small body of published research is available, primarily in the field of social work, reporting on NRPF relating to specific issues, such as domestic and gender-based violence (Anitha, 2010; Mackenzie & Stephens, 2015). Yet, more research is needed to understand the experiences of migrants subject to NRPF and the consequences of this stipulation, particularly amongst families with children (Farmer, 2017). This is especially critical given the potential for families with NRPF to be at risk of destitution (Scottish Parliament, 2017) and reported links between poverty and negative health outcomes (Wagstaff, 2002; Lund, 2012).

The aim of the current study was to investigate the everyday experiences of migrant families living in the UK with NRPF. The study addressed the research question: What is the impact of NRPF on the experiences of migrant families in the UK?

Method

Approach

A qualitative, semi-structured interview approach was adopted to allow in-depth exploration of participants' personal experiences of No Recourse to Public Funds.

Participants

A snowball sample of six, Black African participants (2 males and 4 females) was recruited from a church community based in the North East of England. All participants had spouses and all but one had between 1 and 5 dependent children aged between 5 months and 16 years. The remaining participant had 2 children aged 22 and 24 years, but they had moved to the UK at the ages of 7 and 9 years. This participant was therefore able to reflect on their experiences of living with NRPF whilst caring for their children.

Materials and Procedure

Prior to commencement of the research, the study protocol was approved through Northumbria University's Ethical Approval System. Research information was then distributed to potential participants and written consent was obtained.

All interviews took place in participants' homes and were audio recorded with prior participant approval. Interviews were guided by a semi-structured interview schedule that focussed on family composition and work status; experiences of moving to and living in the

UK; and understanding and experiences of No Recourse to Public Funds. Interviews lasted an average of 30 minutes, only coming to a close once participants felt they had exhausted all their views on the topic. Participants were debriefed and thanked for their participation.

Interview recordings were transcribed verbatim and thematic analysis was conducted (Braun & Clarke, 2006). The completed transcripts were checked against the recordings for accuracy and were read repeatedly to ensure familiarity with the data before initial codes were developed. Codes were refined throughout the analytical process and similar codes were drawn together to develop three key themes relevant to the research question. Both authors reviewed the interview transcripts and agreed that the final themes provided an accurate representation of the data set.

Findings

Participants discussed the impact of No Recourse to Public Funds (NRPF) on themselves and their families. From these discussions, three main themes were identified: Lack of Knowledge and Understanding; Financial Pressures; Making Do and Missing Out. Each theme is subsequently outlined with participant quotes presented to support each theme.

Theme 1: Lack of Knowledge and Understanding

Most participants were not aware of the NRPF stipulation until receiving their visas. In cases where participants had heard of NRPF, they did not understand it in any detail; they were simply aware that they would not be able to access financial support from the state, but did not understand at the time how difficult this would be:

I think our case might be typical of many hmm is it immigrant now coming to the UK. You may not have heard about no recourse to public funds until you receive your visa and open it up then you find a one line statement: no recourse to public funds... You will find out that you suddenly found yourself in a system. With that stamp on your visa is like a learning process anywhere you go, anything people want to give you, you will have to ask, is there public funds or not (P1)

When considering the implications of NRPF, participants typically based their decision to move to the UK on their lifestyle in their home countries, where they owned property and land and were earning salaries sufficient to meet their needs without any support from the state:

A month's rent in the UK is more than a year rent in Nigeria so is more expensive to live here and that I was not so much prepared for because I thought since I did not benefit from public funds in Nigeria and the family was fine then coming over here, I should be okay too (P5)

However, when living in the UK, participants found themselves facing considerable hardship within a complex system of strict regulations, which changed regularly. Participants felt that they had to be cautious in navigating government systems at a local and national level. They lived in fear of claiming for something to which they were not entitled in case this resulted in withdrawal of their Visa:

Actually if anybody with no recourse to public funds apply for Child Benefit, the person may likely get it but when it is turn for you to renew your visa status it is one of the questions they ask, have you received any state benefits and once you say yes you have breached the condition of your visa because you are not supposed to have right to public funds. Knowing that, you will not want to waste thousands for hundred so you dare not go there (P6)

Furthermore, discussions with participants suggested that there is a lack of understanding about NRPF amongst various professional groups. They gave accounts of being encouraged to apply for public funds by Local Authorities, health professionals and employers, then having to explain that accessing funds could jeopardise their Visa status. One participant talked about their family's experiences of receiving support from the Local Authority under Section 17 of the Children's Act (1989), which enforces a duty of care for children regardless of their Visa status. The family were being forced to leave their home because it was unfit for habitation due to flooding. With the support of their children's school, the family were provided with a house to rent through the Local Authority. However, they received regular visits from the Local Authority trying to move them onto private housing and were subsequently evicted because the Local Authority could not justify providing them with housing due to their status of NRPF:

The council were on our neck almost every day to get us out because they were unable to justify why they gave us house because we have no recourse to public funds...I received a letter of eviction from the council. It had never happened before. Not in my country and not in any private house but from the council we received letter of

eviction which was too sad and that was why we were under pressure to get any house so we can move out (P5)

Participants felt that there needs to be more transparent information made available about NRPF from the point of Visa application so that people fully understand the implications of this stipulation.

Theme 2: Financial Pressures

Moving to the UK with NRPF had huge financial implications for families. The largest outgoing costs discussed by participants related to their visa applications. To be able to remain in the UK, participants were required to obtain visas for each family member. These visa costs often ran into thousands of pounds and placed families under considerable financial strain:

It is like we are working to fund that application all the time. We just have to save for it because if the visa application have something to do with our existence in the UK, then every other things have to be suspended until we do it (P6)

All participants had originally moved to the UK to study, which meant that their Visa status was subsequently changeable. Where participants had arrived on a student Visa, they were required to apply for a different Visa once their course had finished to allow them to remain in the UK to seek employment. In some cases, participants had applied to renew their student Visas then needed to change their Visa status within the same year, which resulted in them paying multiple times for Visa application fees within a relatively short period with no allowances made for time remaining on current Visas:

I think the process is quite challenging in the sense that the money involved is-killing... Within a year in the course of renewing visa I paid about seven-thousand-pounds. So I paid that even when I was still having four months left on my visa (P2)

Furthermore, the recent introduction of the Immigration Health Surcharge (IHS) meant families were also required to pay a fee to be able to access NHS care in the UK. A fee was required to cover each family member, including children born in the UK to parents who had not yet been granted indefinite leave to remain. The surcharge covered the cost of medical assistance but if medication was prescribed, participants were also required to pay NHS prescription charges to be able to obtain medication, thus adding to their outgoing expenses. Participants felt that IHS was unfair, especially when they were paying employment

contributions into the UK system, which allows UK citizens to access NHS services free of charge:

I think they should consider people that are here working full time, paying taxes and you still have to pay NHS surcharge. It is unfair (P4)

Housing costs were another key issue for most participants. All but one participant rented their homes, but they were not entitled to access housing through the Local Authority, which meant they were renting privately and paying much higher rental costs than they would be in social housing. One participant highlighted that council accommodation is 'fifty to sixty percent cheaper than private rent' so being able to access council housing 'would have saved us some money in thousands' (P6).

In addition, participants discussed the need to demonstrate financial stability by evidencing that they have the money available to support themselves for the duration of their stay in the UK without any reliance on public funds. The required amount would be based on the duration of the visa application and would increase if the applicant had dependent children:

If on my CAS is two years then I have to show evidence of funding for I and each of my dependent for the period of two years have to be in my account... which is a lot of stress but you still have to prove that you will have no reason to ask for public funds (P1)

However, participants relied on different mechanisms to raise funds to cover the costs associated with remaining in the UK with NRPF. Typically, the methods used to raise funds were not indicative of financial stability. Borrowing money from family and friends was frequently mentioned as a means of raising funds. Some had also left goods and property in their home countries, which they subsequently sold to cover visa application fees and associated costs. Participants also earned income through employment but for some, visa restrictions meant they could only work a small number of hours per week, which limited their income:

I have had to lose all that I had in Nigeria. When I was coming to this country, I had three plot of land and we have had to sell them all to survive so I have lost everything. I lost my job. I was a university lecturer. I've lost my house, properties, I lost everything so if I go back, with all the government have taken from me, where do I go? Where do I live? (P5)

Participants felt heavily penalised for trying to remain in the UK. They believed that the system was unfair, requiring them to pay in substantial amounts of money, but giving nothing back in return and leaving them with nothing in their home countries to return to.

Theme 3: Making Do & Missing Out

The cumulative effects of NRPF were experienced in many aspects of participants' lives. Higher living costs, imposed restrictions and necessary lifestyle choices meant that families often missed out on opportunities that are widely available to UK citizens.

Participants expressed particular concerns that their children often missed out on a lifestyle that was equivalent to that of their peers, but they did strive to ensure their children's basic needs were met:

After paying the rent and utility bills and everything, I often look at what is left then I make sure that the basic foods for the house- when buying for the house, you do not buy for pleasure , you have to buy what is necessary and always have the children in mind...when I am doing shopping I have to think about the children before us (P1)

Throughout schools in England, children from low income households are provided with additional support to access various resources. For example, they can have lunch at school free of charge each day and in some cases are able to access school trips for free or at a subsidised rate. Participants in the current study discussed how their children were excluded from these opportunities. As parents, they had to pay for their children's school meals or provide packed lunches and pay for school trips. They were also keen for their children to be able to participate in extracurricular activities but could not afford the associated costs:

Sometimes when we need to support our children with their school meal, we have to manage what we have (P6)

Childcare was also a challenging issue. Although free childcare is available for children in England from the age of 2, participants were not able to access this and were therefore required to pay full childcare costs, which had difficult consequences. In one case, a participant remained in the UK to continue in her job as an electrical engineer while her husband and child returned to Nigeria because they simply could not afford the childcare costs needed to allow both parents to work in the UK. Another participant was forced to rely on an unregistered childminder as they could not afford to pay for registered childcare. The unregistered childminder accepted a lower rate of payment than a registered childcare

provider and would allow some flexibility in their payment schedule so if the family could not afford to pay one month, they would just pay double the next month.

Participants with older children discussed the challenges that their children faced with accessing higher education. Their children were required to pay tuition fees at an international rate and were unable to access any financial support. To manage this, one participant talked about her daughter having to remain at home for the majority of her time at University because they could not afford for her to move away and live independently like many of her peers. Another participant had a child hoping to be able to study medicine at university but they were not confident that this would be an option they could offer their child:

We do not even know what the future holds next year when she supposed to be in University... We are talking twenty-five-thousand pounds a year's school fees. You can imagine where that is coming from if you know on the present income (P5)

Although participants were struggling with their situations, they expressed gratitude and had faith that their circumstances would improve:

Even when you don't have food to eat or clothes to wear but you know there is life and then there is hope for tomorrow. Today might not be fine. I might have just one pair of shoes to wear for the next six months but I am not walking bare footed (P1)

They accepted help from charities and their communities and supported others where they were able to. Some participants were involved in charity work; helping homeless people by providing food and clothes, and volunteering in food banks. However, they highlighted the irony that they were reaching out to support others through mechanisms that they were unable to access themselves due to NRPF:

I know what I have gone through and I know a lot of families that are in this situation. We are facing a challenge that even food bank cannot help...the issues we have to tick on the form state that people must be on benefit before they can access the food bank, so people with no recourse to public funds cannot even benefit from it (P5)

Discussion

The overarching aim of the current study was to qualitatively investigate the impact of no recourse to public funds (NRPF) on the everyday experiences of migrant families. At the

current time, there is little published research available on this topic; but there is a definite need to explore it given the potential for the NRPF visa stipulation to lead families into destitution (Scottish Parliament, 2017; Anitha, 2010).

Overall, the findings showed that no recourse to public funds is challenging and difficult to understand, not only for people who have this stipulation on their visas, but also for professionals involved in delivering public services. Where systems and processes were unclear, families were left in a state of fear and uncertainty, particularly because the consequences of wrongly claiming public funds could result in their UK visas being revoked. In addition, there appeared to be a lack of trust towards practitioners who were perceived as having little knowledge of no recourse to public funds and were putting families at risk of breaching the conditions of their visa by advising them to access funds to which they were not entitled. Participants seemed to live cautiously; avoiding access to support in case it jeopardised their stay in the UK.

These feelings of dread and uncertainty; a lack of trust and control; and an acute awareness of risk have all been associated with fear (Ropeik, 2004). Acknowledgement of fear is important as it can dictate how a person manages their lifestyle and can prevent access to support when it is needed. Keating and Robertson (2004) investigated mental health support amongst African communities within the UK and found that fear can prevent people from accessing support services until they were in crisis. In the context of the current study, a reluctance to seek support and a lack of trust in professionals, coupled with fear and financial pressures could leave people with NRPF at substantial risk of health-related difficulties.

Financial pressure in itself has been associated with detrimental health outcomes (Wagstaff, 2002; Lund, 2012). Moreover, a high level of debt relative to available finances has been associated with poorer physical health and higher levels of self-reported stress and depression (Sweet, Nandi, Adam & McDade, 2013). Participants in the current study discussed the enormous pressure placed upon them by costly visa processes, expensive housing and restrictions on public funds. Some had been forced to rely on loans and the sale of assets in their home countries to remain in the UK suggesting that their outgoing costs exceeded their income. Again, these findings in relation to previous research suggest that UK immigrants who are subject to NRPF could be at risk of poorer health outcomes as a result of their circumstances.

The financial pressures faced by participants led to concerns that their children were missing out on a lifestyle equivalent to that of their peers. Despite their best efforts, participants discussed their children missing out on valuable leisure activities and educational opportunities, either through a lack of money or imposed restrictions. Children affected by their family circumstances in this way are at risk of social exclusion and stigma (Ridge, 2011), which can have wider negative consequences, such as depression and anxiety (Bierman, 2004).

The findings of the current study on the whole suggest that NRPF is associated with a lifestyle characterised by ongoing hardship, fear and a lack of support from public services. Concerningly, such circumstances have been linked to detrimental outcomes for physical and mental health. Moreover, children are not protected from the impacts of familial hardship and could be at risk of social exclusion, with pervasive negative outcomes.

Based on the current findings, it appears there is a need for more research to be carried out investigating the impact of NRPF. Future studies should look particularly at health and wellbeing, and the impacts of NRPF on children. Furthermore, although the current study is limited as it only explored the views of a small number of participants based in the North-East of England, it highlighted that there is a lot of misunderstanding surrounding NRPF, which is possibly exacerbated by frequent changes to costs and processes associated with remaining in the UK. It would therefore be beneficial for future research to explore the impacts of NRPF longitudinally, taking into consideration the experiences of participants within a complex and frequently changing system. Finally, the current study drew on the views of a small, homogenous sample of participants; all had arrived in the UK to study and were living within the North-East of England. Whilst this is advantageous as it reduces the number of factors that could influence participants' views, it was clear that there were issues with a lack of trust in Local Authority professionals. It would therefore be useful for further research to explore NRPF in the context of different Local Authorities to identify the level of understanding and support available to help families with NRPF.

In conclusion, the current study highlighted that NRPF places families under substantial pressure. There is a general lack of knowledge surrounding the visa stipulation, which leaves migrants facing challenging circumstances that they were not prepared for, often whilst trying to gain qualifications, hold down employment and take care of children. The detrimental health outcomes associated with hardship and fear, which characterise NRPF, should be

investigated in relation to the experiences of migrants living in the UK, particularly as support beyond that provided by family and friends appears to be lacking.

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